CLARATION FOR PATENT APPLICATION

1948-4761 Docket N°CIB1287

a below natified inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if dural names are listed below) of the subject matter which is claimed and for which a patent is sought on the inventor (if dural names are listed below) of the subject matter which is claimed and for which a patent is sought on the inventor (if dural names are listed below) of the subject matter which is claimed and for which a patent is sought on the inventor (if dural names are listed below) of the subject matter which is claimed and for which a patent is sought on the inventor (if dural names are listed below) of the subject matter which is claimed and for which a patent is sought on the

DEVICE FOR AUTOMATIC CORRECTION OF THE ORIENTATION OF A MOTOR-VEHICLE HEADLAMP IN ELEVATION

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above, to the best of my ability. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. 1.56 as set forth on the reverse side hereof. I hereby claim foreign priority benefits under 35 U.S.C. 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date (1) before that of the application on which priority is claimed or (2) if no priority claimed, before the filing date of this application:

PRIOR FOREIGN APPLI	CATION(S)	Priority Claimed			
	Country	Month /Day /Year Filed	yes	no	
Number		10/27/2000	XX		
0013890	France	10/21/2000			

I hereby claim the benefit under 35 U.S.C. 120/365 of all United States and PCT international applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior applications in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:

PRIOR U.S. OR PCT APPLICATION(S)

PRIOR U.S. OR PCT APPLICATION(C	Status			
Application serial N°	month/day/Year filed	patended	pending	abandoned
				L

And I hereby appoint the following attorney (s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Jerome G. Lee (Reg. N°16,967) Joseph A. Calvaruso (Reg. N° 28,287)

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

MORGAN & FINNEGAN 345 Park Avenue, NEW YORK, N.Y. 10154

(212) 758-4800

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardise the validity of the application or any patent issued thereon.

and that carry		• •			
1) Inventor's signature		11 %		Date (month/day/year)	11/10/2001
Inventor's Name (typed)	Philippe		COUILLAUD		p French
Residence (City)	First 93012 BOB	Middle in		State/Foreign/country	France
Post Office Address		C/O VALEO VIS	SION - 34, rue St		
2) Inventor's signature		[]		Date (month/day/year)	14/10/2002
Inventor's Name (typed)	Joël	Lili	LELEVE	Citizensh	ip French
Residence (City)	First 93012 BOB	Middle in SIGNY CEDEX	·	State/Foreign/country	France
Post Office Address		C/O VALEO VI	SION - 34, rue S	t ANDRE	
3) Inventor's signature				Date (month/day/year)	
Inventor's Name (typed)					ip French
	First	Middle ir	nitial Family	y Name	
Residence (City)				State/Foreign/country	
Post Office Address					